

## EPIC Summer Camp 2016 Payment Information – Camp Staff

Cost: \$50/team member

Name: \_\_\_\_\_

Background Check submitted? Y / N

Licensed driver? Y / N

Insured car available? Y / N # of seats: \_\_\_\_\_

### Option #1: **Pay In Full**

Pay in Full option is due by June 15

I have attached cash or check

Please charge my card (below) on this date:

\_\_\_\_\_ (must be before June 15)

*Note: Pay in Full requires credit/debit card info unless paid upon submission of this form.*



### Option #2: **3-Month Payment Plan**

3-Month Payment Plan option will allow your card to be charged in 3 payments, to be processed on the following dates:

April 15 - \$17/team member

May 15 - \$17/team member

June 15 - \$16/team member

### **Payment Information**

I agree to pay the above amount in full by June 1, 2016. I understand and agree that my card will be charged by the above terms. I understand that camp fees are non-refundable.

CC#: \_\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_ CVV: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date